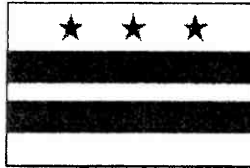


Samples

| <u>Attachment B - Proof of Trade Name Registration</u> | <u>Page</u> |
|---|--------------------|
| District of Columbia | 2 |
| Maryland (option 1) | 3 |
| Maryland (option 2) | 4 |
| Virginia, City of Alexandria | 5 |
| Virginia, Arlington County (sole proprietor) | 6 |
| Virginia, Arlington County (corporation) | 7 |
| Virginia, Fairfax County (sole proprietor) | 8 |
| Virginia, Fairfax County (corporation) | 9 |

GOVERNMENT OF THE DISTRICT OF COLUMBIA
DEPARTMENT OF CONSUMER AND REGULATORY AFFAIRS
CORPORATIONS DIVISION



C E R T I F I C A T E

THIS IS TO CERTIFY that all applicable Trade Name requirements of the Omnibus Regulatory Reform Act of 1998 have been complied with and accordingly, this **CERTIFICATE OF TRADE NAME REGISTRATION** is hereby issued to:

AKAND LLC

Trade Name: AKAND TRANSPORTATION

IN TESTIMONY WHEREOF I have hereunto set my hand and caused the seal of this office to be affixed as of 9/9/2014 1:08 PM

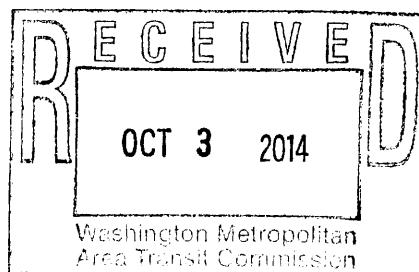
Business and Professional Licensing Administration



PATRICIA E. GRAYS
Superintendent of Corporations
Corporations Division

Vincent C. Gray
Mayor

Tracking #: 8zroUIY2



State of Maryland
**Department of
Assessments and Taxation**

Charter Division



Lawrence J. Hogan, Jr.
Governor

Owen C. Charles
Acting Director

Date: 02/11/2015

MESFIN ZENEBE DEGINETU
9148 PINEY BRANCH RD
APT 101
SILVER SPRING MD 20903

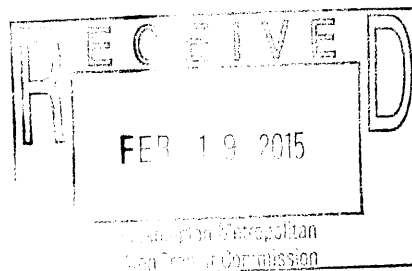
THIS LETTER IS TO CONFIRM ACCEPTANCE OF THE FOLLOWING FILING:

TRADE NAME : ABBA DAGNEW
DEPARTMENT ID : T00392108
TYPE OF REQUEST : TRADE NAME REGISTRATION
DATE FILED : 02-11-2015
TIME FILED : 10:55-AM
RECORDING FEE : \$25.00
EXPEDITED FEE: . . : \$50.00
FILING NUMBER : 1000362007564026
CUSTOMER ID : 0003206637
WORK ORDER NUMBER : 0004423217

PLEASE VERIFY THE INFORMATION CONTAINED IN THIS LETTER. NOTIFY THIS DEPARTMENT IN WRITING IF ANY INFORMATION IS INCORRECT. INCLUDE THE CUSTOMER ID AND THE WORK ORDER NUMBER ON ANY INQUIRIES.

THIS FILING IS EFFECTIVE FOR FIVE YEARS FROM THE DATE OF REGISTRATION BY SDAT. A RENEWAL NOTICE WILL BE MAILED TO THE OWNER SIX MONTHS PRIOR TO THE EXPIRATION DATE. CONTACT THIS OFFICE IF YOU HAVE NOT RECEIVED THE NOTICE. IF NOT RENEWED, THE DEPARTMENT WILL FORFEIT THE TRADE NAME AND A NEW APPLICATION MUST BE FILED.

Charter Division
Baltimore Metro Area (410) 767-1350
Outside Metro Area (888) 246-5941



STATE OF MARYLAND
Department of Assessments and Taxation

I, PAUL B. ANDERSON OF THE STATE DEPARTMENT OF ASSESSMENTS AND TAXATION OF THE STATE OF MARYLAND, DO HEREBY CERTIFY THAT THE DEPARTMENT, BY LAWS OF THE STATE, IS THE CUSTODIAN OF THE RECORDS OF THIS STATE RELATING TO RIGHTS OF TRADE NAMES , OR THE RIGHTS OF TRADE NAMES TO TRANSACT BUSINESS IN THIS STATE, AND THAT I AM THE PROPER OFFICER TO EXECUTE THIS CERTIFICATE.

NATIONAL STAR TRANSPORTATION IS A TRADE NAME FILED IN THE AGENCY RECORD ON MAY 13, 2013

THE FILING IS STILL IN EFFECT.

JAMES THOMAS MILLER,II IS LISTED AS THE OWNER OF THIS TRADE NAME.

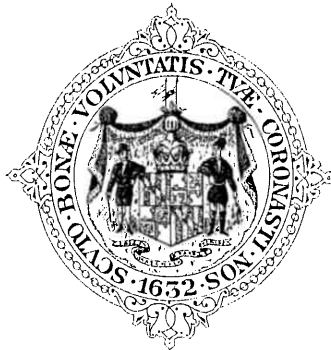
THE LOCATION AND ADDRESS OF THIS TRADE NAME IS:

NATIONAL STAR TRANSPORTATION
5417 85TH AVENUE
LANHAM MD 20706

IN WITNESS WHEREOF, I HAVE HEREUNTO SUBSCRIBED MY SIGNATURE AND AFFIXED THE SEAL OF THE STATE DEPARTMENT OF ASSESSMENTS AND TAXATION OF MARYLAND AT BALTIMORE ON THIS JULY 17, 2013.



Paul B. Anderson
Charter Administrator



301 West Preston Street, Baltimore, Maryland 21201
Telephone Balto. Metro (410) 767-1344 / Outside Balto. Metro (888) 246-5941 0008336617
MRS (Maryland Relay Service) (800) 735-2258 TT/Voice
Fax (410) 333-7097

CRTGST

CERTIFICATE OF ASSUMED OR FICTITIOUS NAME
Commonwealth of Virginia

TR14001256

This is to certify that the below named person, partnership, limited liability company or corporation intends to conduct or transact business under an assumed or fictitious name in the [/] City [] County of Alexandria

1. The ASSUMED OR FICTITIOUS NAME of business

HEAVEN LIMOUSINE Services

2. The above business is owned by the following entity type:

[/] SOLE PROPRIETORSHIP (Complete A below) [] PARTNERSHIP (Complete B below)

[] LIMITED LIABILITY COMPANY (Complete C below) [] CORPORATION (Complete C below).

A. NAME OF OWNER George Seyoum Kebede

RESIDENCE ADDRESS 5021 Seminary Rd Apt

POST OFFICE ADDRESS Alexandria, VA 22311 Apt# 420

B. NAME OF PARTNERSHIP

OFFICE ADDRESS

POST OFFICE ADDRESS

(1) Is this a general partnership? [] NO [] YES. If YES, complete the Statement of Partners on Page Two of Two.

(2) Is this a domestic limited partnership? [] NO [] YES. If YES, a certified copy of this certificate must be filed with the State Corporation Commission. Va. Code § 59.1-70.

(3) Is this a foreign limited partnership? [] NO [] YES. If YES, indicate the date of the certificate of registration to transact business in the Commonwealth of Virginia issued by the State Corporation

Commission:

A certified copy of this certificate must be filed with the State Corporation Commission. Va. Code § 59.1-70.

C. NAME OF [] CORPORATION [] LIMITED LIABILITY COMPANY

OFFICE ADDRESS

POST OFFICE ADDRESS

(1) A corporation or limited liability company must file a certified copy of this certificate with the State Corporation Commission. Va. Code § 59.1-70.

(2) Is this a foreign corporation or a foreign limited liability company? [] NO [] YES. If YES, indicate the date of the certificate of authority/registration to transact business in the Commonwealth of Virginia issued by the State Corporation Commission:

ACKNOWLEDGMENT

I certify that the foregoing is true and correct to the best of my knowledge and belief.

— Sole Proprietorship George Seyoum Kebede

NAME OF OWNER

[Signature]

SIGNATURE OF OWNER

Partnership

NAME OF GENERAL PARTNER

SIGNATURE OF GENERAL PARTNER

Corporation

NAME OF PRESIDENT

SIGNATURE OF PRESIDENT

Limited Liability Company

NAME OF MEMBER/MANAGER

SIGNATURE OF MEMBER/MANAGER

[/] City [] County of Alexandria

State/Commonwealth of Virginia

Subscribed and acknowledged before me, this 02 day of May, 20 14

by Kebede, George Seyoum

NAME

Owner

TITLE

My commission expires N/A

[/] CLERK/DEPUTY CLERK [/] NOTARY PUBLIC

Registration No. N/A

CLERK'S OFFICE

Filed in the Clerks' Office of the Alexandria

Circuit Court on 05/02/14

DATE

Edward Sononien, Clerk by

Deputy Clerk

CERTIFICATE OF TRADE NAME FOR SOLE PROPRIETORSHIP

In the County of Arlington/City of Falls Church, I hereby certify in accordance with the provisions of section 59.1-69 of the Code of Virginia, 1950, as amended relating to the conducting of business under an assumed name, I **abraham habteab** trading as **super sedan & limo** doing business at **2912 17th street south, 201, Arlington, VA, 22204, United States** Arlington County, Virginia or the City of Falls Church, Virginia, do hereby certify that I am the sole owner of said business, that my residence address is **2912 17th street south, 201, arlington, VA, 22204, United States** and the duration of said business is indefinite.

GIVEN under my hand this 31 day of Jan, 20 14.

abraham habteab

abraham habteab

Subscribed and sworn to before me this 31 day of Jan, 20 14.

Paola Giovannetti

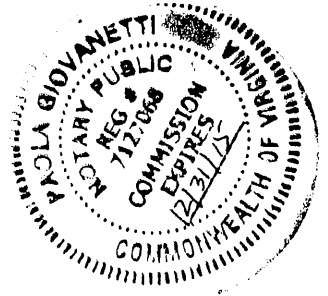
Notary Public

PAOLA GIOVANNETTI

Notary Public Printed Name

12/31/15

Notary Public Commission Expiry Date



CERTIFICATE OF TRADE NAME FOR CORPORATION

CERTIFICATE REQUIRED TO BE FILED BY A CORPORATION CONDUCTING BUSINESS IN THE COMMONWEALTH OF VIRGINIA UNDER AN ASSUMED OR FICTITIOUS NAME.

We hereby certify in accordance with the provisions of section 59.1-69 of the Code of Virginia, 1950, as amended that we are conducting the business of Transportation at 3251 Washington Boulevard, Arlington, VA, 22201, United States Arlington County, Virginia/City of Falls Church, Virginia, under the name of Express and that no other Corporation has any interest of any kind in said business and that we are the sole owners and proprietors thereof and that our Post Office address is 720 E. Butterfield Road, Suite 300, Lombard, IL, 60148, United States and the Corporation Registered Agent's name is CT Corporation System and the Agent's address is 4701 Cox Road, 301, Glen Allen, VA, 23060, United States.

We further certify that we are authorized to do business in the Commonwealth of Virginia on the 12th day of December, 1995.

GIVEN under my hand this 22 day of August, 2013.

Terrence Oates

Treasurer Terrence Oates, Corporate Officer
Washington Shuttle, Inc.

Subscribed and sworn to before me this 22nd day of August, 2013.

Deidra E. Hellwig

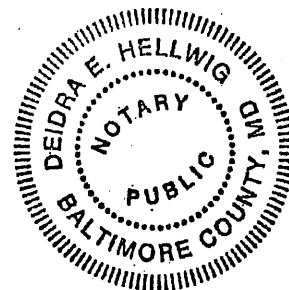
Notary Public

Deidra E. Hellwig

Notary Public Printed Name

02-23-2017

Notary Public Commission Expiry Date

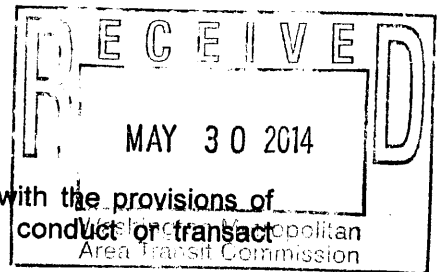


A COPY,
TESTE: PAUL FERGUSON
BY [Signature]
DEPUTY CLERK



Book: 2 Page: 1253
In the Clerk's Office of the Circuit Court of
Arlington County, Virginia at 08-29-2013 09:36:45 AM
this certificate with the Certificate of
Acknowledgement annexed, was recorded
and filed and admitted to record.

**CERTIFICATE OF TRADE NAME
INDIVIDUALS / SOLE PROPRIETORSHIP**



In the ☐ City ☒ County of Fairfax, I hereby certify in accordance with the provisions of §59.1-69 of the 1950 Code of Virginia as amended that I intend to conduct or transact business under the assumed or fictitious name of:

MR. J. TRANSPORTATION

(Name of Business)

at 5815 FLAXTON PL ALEXANDRIA VA 22303
(Street Address) (City) (State) (Zip Code)

TRANSPORTING PASSENGER

(Type of Business)

And that no other person has any interest of any kind in said business and that I am the sole owner and proprietor thereof.

My Post Office Address is: _____

My Residence address is: 5815 FLAXTON PL, ALEXANDRIA, VA, 22303

I certify that the foregoing is true and correct to the best of my knowledge and belief.
Given under my hand this 30 day of May, 2014.

[Signature]

(Signature)

Commonwealth of Virginia
County of Fairfax, to-wit:

I, the undersigned Deputy Clerk (Notary Public) in and for the Commonwealth and County aforesaid, do hereby certify that Seboha Asnake whose name is signed to the foregoing and hereunto annexed Certificate dated the 30 day of May, 2014, has this day personally appeared before me and acknowledged the same before me in my office.

Pansy d. McCray
Deputy Clerk (Notary Public)

My Commission Expires: _____
My registration number is: _____ (VA notaries only)

A COPY TESTE:
JOHN C. FREY, CLERK

BY: Pansy d. McCray
Deputy Clerk

Date: 5-30-2014
Original retained in the office of
the Clerk of the Circuit Court of
Fairfax County, Virginia

**CERTIFICATE OF TRADE NAME
FOR CORPORATIONS**

CERTIFICATE REQUIRED TO BE FILED BY A CORPORATION CONDUCTING BUSINESS IN THE
COMMONWEALTH OF VIRGINIA UNDER AN ASSUMED OR FICTITIOUS NAME.

We hereby certify in accordance with the provisions of §59.1-69 of the 1950 Code of Virginia that we are conducting
the business of limousine and transportation services and Internet web services

at 7424 Wilma Lane, Lorton, VA 22079
(Street Address) (City) (State) (Zip Code)
Fairfax County, Virginia, under the name of
DC Livery
(Name of Business)

and that no other corporation or person has any interest of any kind in said business and that we are the sole owners
and proprietor thereof and that our Post Office address is:
7424 Wilma Lane, Lorton, VA 22079

(Street Address) (City) (State) (Zip Code)
and the Corporation's Registered Agents name is Mohammad Asim Zafar
and the Agents address is 7424 Wilma Lane, Lorton, VA 22079
(Street Address) (City) (State) (Zip Code)

TO BE USED ONLY FOR FOREIGN CORPORATIONS

We further certify that we were authorized to do business in the Commonwealth of Virginia
on the _____ day of _____.

Given under my hand this 22ND, day of December, 2004.

Meraj & Associates, Inc.

CORPORATE NAME

BY: Mohammad Asim Zafar

TITLE: Mohammad Asim Zafar, President

Commonwealth of Virginia

County of Fairfax, to-wit:

I, the undersigned Deputy Clerk (Notary Public) in and for the Commonwealth and County aforesaid, do hereby certify that

MOHAMMAD ASIM ZAFAR, PRESIDENT OF MERAJ & ASSOCIATES, INC., whose name is signed to the foregoing and
hereunto annexed Certificate dated the 22ND day of DECEMBER, 2004, has this day personally appeared before me and acknowledged
the same before me in my office.

Given under my hand this 22ND day of DECEMBER, 2004.

My Commission Expires: 3/31/2008

[Signature]
Deputy Clerk (Notary Public)

In the Clerk's Office of the Circuit Court of Fairfax County, Virginia on Jan 2, 2005.

at 9:03 o'clock A. M, this Certificate with the Certificate of Acknowledgement annexed, was recorded and filed

and attested by me, JOHN T. FREY, CLERK

BY: Stephanie J. Hill
Deputy Clerk

TESTE: JOHN T. FREY, CLERK

BY: Stephanie J. Hill

Deputy Clerk

Date: 1-6-05
Original retained in the office of
the Clerk of the Circuit Court of
Fairfax County, Virginia

BK0088 0781